## Case 16-37712 Doc 1 Filed 11/30/16 Entered 11/30/16 08:43:02 Desc Main Document Page 1 of 54

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself			
		About Debtor 1:	About	Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Nicole First name  A. Middle name	First n	ame e name
	Bring your picture identification to your meeting with the trustee.	Cross Last name and Suffix (Sr., Jr., II, III)	Last n	ame and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	ve		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0892		

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Debtor 1 Nicole A. Cross

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	207 Spring Court	If Debtor 2 lives at a different address:
		Bloomingdale, IL 60108-1968	Norther Over 1 O't Out 1 7 ID Out
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		DuPage County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
ò.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Nicole A. Cross

ar	Tell the Court About	Your E	Bankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Requ</i> page 1 and check the app		or Individuals Filing for Bankruptcy	
	choosing to file under	☐ Chapter 7						
			hapter 11					
		□ c	hapter 12					
		<b>■</b> C	Chapter 13					
3.	How you will pay the fee	•	about how your order. If your	u may pay. Typ attorney is subi	oically, if you are paying the	e fee yourself, you may pay	ce in your local court for more details with cash, cashier's check, or money y pay with a credit card or check with	
				the fee in ins		nis option, sign and attach th	ne Application for Individuals to Pay	
			The Filing Fee in Installments (Official Form 103A).  I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty lapplies to your family size and you are unable to pay the fee in installments). If you choose this option, you must the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.					
).	Have you filed for	■ N		on to Have the C	Snapter 7 Filling Fee walve	ea (Official Form 103B) and	nie it with your petition.	
	bankruptcy within the last 8 years?	□ Ye						
	last o yours.		District		When	Case	number	
			District		When		number	
			District		When		number	
10.	Are any bankruptcy	■ N	n					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Y	es.					
			Debtor			Relatio	nship to you	
			District		When	Case n	umber, if known	
			Debtor			Relatio	nship to you	
			District		When	Case n	umber, if known	
11.	Do you rent your residence?	■ N	o. Go to I	ine 12.				
		□ Ye	es. Has yo	ur landlord obta	ained an eviction judgmen	against you and do you wa	nt to stay in your residence?	
				No. Go to line	12.			
				Yes. Fill out <i>In</i> bankruptcy per		viction Judgment Against Yo	ou (Form 101A) and file it with this	

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Debtor 1 Nicole A. Cross Document Page 4 of 54 Case number (if known)

art	Report About Any Bu	sinesses	You Owr	as a Sole Proprieto	r			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of busin	ess			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	& ZIP Code			
	it to this petition.		Chec	k the appropriate box	to describe your business:			
				Health Care Busine	ss (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real E	state (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as def	ined in 11 U.S.C. § 101(53A))			
				Commodity Broker (	(as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you ir is, cash-fl i.C. 1116(	ndicate that you are a sow statement, and fed 1)(B).	ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	No.	I am r	not filing under Chapte	er 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am f	iling under Chapter 11	1 and I am a small business debtor according to the definition in the Bankruptcy Code.			
art	4: Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	■ No.  ☐ Yes.	What is	the hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?				
				١	Number, Street, City, State & Zip Code			

Debtor 1 Nicole A. Cross

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 54 Case number (if known) Debtor 1 Nicole A. Cross Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50.000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Nicole A. Cross Signature of Debtor 2 Nicole A. Cross Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on November 29, 2016

MM / DD / YYYY

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Debtor 1 Nicole A. Cross

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joseph P. Doyle	Date	November 29, 2016					
Signature of Attorney for Debtor		MM / DD / YYYY					
Joseph P. Doyle							
Printed name							
Law Office of Joseph P. Doyle LLC							
105 S. Roselle Road, Suite 203	105 S. Roselle Road. Suite 203						
Schaumburg, IL 60193							
Number, Street, City, State & ZIP Code							
Contact phone <b>847-985-1100</b>	Email address	joe@fightbills.com					
6277393							
Bar number & State							

		Docum	ent Page 8 of 5	<u> </u>	
Fill in this inform	mation to identify your	case:			
Debtor 1	Nicole A. Cross				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)		·
٠.	1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	22,515.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	22,515.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	76,474.67
	Your total liabilities	\$	76,474.67
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,420.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,068.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
	■ Yes		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known) Debtor 1 Nicole A. Cross

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	0.704.67
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	\$ 2,794.67

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

		Document	Page 10 of 54		
Fill in this infor	mation to identify your case	and this filing:			
Debtor 1	Nicole A. Cross	NELII N			
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the: NOR	THERN DISTRICT OF ILL	NOIS		
Case number					☐ Check if this is an
					amended filing
Official Fo	rm 106A/B				
	e A/B: Propert	·V			12/15
hink it fits best. E nformation. If mor Answer every ques	separately list and describe item le as complete and accurate as p e space is needed, attach a sep- stion.  Each Residence, Building, Land	possible. If two married peop arate sheet to this form. On th	le are filing together, both a he top of any additional pag	are equally responsible for s	upplying correct
	have any legal or equitable inter	·			
_		est in any residence, building	, iand, or similar property:		
No. Go to Pa	·· <del>-</del> ·				
☐ Yes. Where	s the property?				
Part 2: Describe	Your Vehicles				
□ No ■ Yes					
3.1 Make:	Toyota	Who has an interest in the	ne property? Check one		claims or exemptions. Put red claims on <i>Schedule D</i> :
Wodel.	Forerunner	Debtor 1 only			aims Secured by Property.
Year: Approxima	2010 te mileage: 62.000	Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
Other infor		☐ Debtor 1 and Debtor 2 ☐ At least one of the deb		entile property:	portion you own:
	ull - Full Coverage	_		¢40,000,00	¢40,000,00
	urance - Car was ed by CarMax for 00	☐ Check if this is comn (see instructions)	unity property	\$19,000.00	\$19,000.00
Examples: Boa  No Yes  Shadd the dolla pages you have pages you have pages.	rcraft, motor homes, ATVs a tts, trailers, motors, personal was ar value of the portion you o ave attached for Part 2. Write Your Personal and Household have any legal or equitable i	watercraft, fishing vessels, s wn for all of your entries for that number here	nowmobiles, motorcycle a	nccessories	\$19,000.00  Current value of the
		,	J		portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 1

claims or exemptions.

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14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

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Debtor 1 Nicole A. Cross 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1.950.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ Yes.... Cash on Hand \$15.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **Checking account with Chase Bank** \$250.00 17.1. \$1,300.00 17.2. **Checking Account with BMO Harris Bank** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description.

Case 16-37712 Doc 1 Filed 11/30/16 Entered 11/30/16 08:43:02 Desc Main Document Page 13 of 54 Debtor 1 Case number (if known) Nicole A. Cross 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: Term Life Insurance policy through

32. Any interest in property that is due you from someone who has died

employer - (No cash surrender value)

Term Life Insurance policy through

Banner - (No cash surrender value)

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

☐ Yes. Give specific information..

\$0.00

\$0.00

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Nicole A. Cross Debtor 1 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1,565.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$19,000.00 57. Part 3: Total personal and household items, line 15 \$1,950.00 58. Part 4: Total financial assets, line 36 \$1,565.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$22,515.00 Copy personal property total \$22,515.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$22,515.00

Official Form 106A/B Schedule A/B: Property page 5

Debto Debto (Spouse United Case (if know)  Offic Sch Be as often be preciped by appreciped by apprec	or 1  or 2 e if, filing) d States Ba  number  or in the complete are operty you lided, fill out an number (if known in the complete stopplicable sto	rm 106C  e C: The Prope  and accurate as possible. If two sted on Schedule A/B: Propert d attach to this page as many on hown).  property you claim as exemple nount as exempt. Alternative atutory limit. Some exemption limited in dollar amount. He	married people are filing ty (Official Form 106A/B) copies of Part 2: Addition pt, you must specify the by, you may claim the fons—such as those for	ILLINC  I togeth as you hal Page e amoutull fair health	as Exempt  ner, both are equally responsible four source, list the property that you ge as necessary. On the top of any unt of the exemption you claim.	additional pages, write your name and  One way of doing so is to state a ing exempted up to the amount of penefits, and tax-exempt retirement to under a law that limits the
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the proneeded case n  For easpecification appropriate to the  Part 1  1. W	operty you li d, fill out an number (if kr ach item of fic dollar ar oplicable si	sted on Schedule A/B: Propert d attach to this page as many on nown). property you claim as exemp nount as exempt. Alternative atutory limit. Some exemption limited in dollar amount. He	ty (Official Form 106A/B) copies of Part 2: Addition pt, you must specify the ly, you may claim the fons—such as those for	as you nal Pag e amou full fair	ur source, list the property that you ge as necessary. On the top of any unt of the exemption you claim. market value of the property be a aids, rights to receive certain b	claim as exempt. If more space is additional pages, write your name and One way of doing so is to state a ing exempted up to the amount of lenefits, and tax-exempt retirement le under a law that limits the
specif any ap funds- exemp to the Part 1	fic dollar ar oplicable st	nount as exempt. Alternative atutory limit. Some exemption nlimited in dollar amount. He	ely, you may claim the fons—such as those for	ull fair health	market value of the property be a aids, rights to receive certain b	ing exempted up to the amount of enefits, and tax-exempt retirement e under a law that limits the
<b>Part 1</b> 1. W	ption to a p				etermined to exceed that amount	t, your exemption would be limited
1. <b>W</b>		statutory amount.				
		y the Property You Claim as	•			
	hich set of	exemptions are you claimin	g? Check one only, eve	n if you	ır spouse is filing with you.	
_	You are cl	aiming state and federal nonba	ankruptcy exemptions.	11 U.S	.C. § 522(b)(3)	
	You are cl	aiming federal exemptions. 1	1 U.S.C. § 522(b)(2)			
2. <b>F</b> c	or any prop	erty you list on Schedule A/	∕B that you claim as exe	empt, f	ill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property		Current value of the	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption
30	criedule A/B	mat hats this property	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
		a Forerunner 62,000 miles - Full Coverage Auto	s \$19,000.00	•	\$2,400.00	735 ILCS 5/12-1001(c)
In C	nsurance - Car was appraised by CarMax for \$19,000.00 Line from Schedule A/B: 3.1		ce - Car was appraised by I 100% o any app		100% of fair market value, up to any applicable statutory limit	
		a Forerunner 62,000 miles - Full Coverage Auto	s \$19,000.00		\$4,000.00	735 ILCS 5/12-1001(b)
In C	nsurance - arMax for	Car was appraised by \$19,000.00 nedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	learing Ap	oparel nedule A/B: 11.1	\$800.00		\$800.00	735 ILCS 5/12-1001(a)
LII	me irom s <i>ci</i>	ledule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
		ming a homestead exemption djustment on 4/01/19 and every			ed on or after the date of adjustmen	nt.)

Official Form 106C

☐ Yes

Fill in this infor	mation to identify your	case:		
Debtor 1	Nicole A. Cross			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if
				amended

## Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

	Out	50 10 07712	, Σου ± Γ	Ocument	Page 1	7 of 54	00.40.02	oo wan
Fill in	this inform	ation to identify your						
Debtor	r 1	Nicole A. Cross						
		First Name	Middle Na	me	Last Name			
Debtor (Spouse		First Name	Middle Na	me	Last Name			
United	States Ban	kruptcy Court for the:	NORTHERN	DISTRICT OF IL	LINOIS		—	
	number							
(if known	1)						_	check if this is an
							a	mended filing
Offici	ial Form	106E/F						
Sche	edule E/	F: Creditors W	ho Have	Unsecured	l Claims			12/15
Schedul Schedul eft. Atta	le G: Execute le D: Credito ach the Cont	acts or unexpired leases ory Contracts and Unexp rs Who Have Claims Sec inuation Page to this pag ber (if known).	ired Leases (Off ured by Propert	icial Form 106G). y. If more space is	Do not include needed, copy	any creditors with p the Part you need, f	partially secured claims fill it out, number the en	that are listed in tries in the boxes on the
Part 1:		of Your PRIORITY Un						
_	•	rs have priority unsecure	d claims agains	t you?				
	No. Go to Pa	art 2.						
	Yes.	( )		<b>.</b>				
Part 2		of Your NONPRIORIT						
_	-	rs have nonpriority unsec	_	<u>-</u>				
Ц	No. You have	e nothing to report in this p	art. Submit this fo	orm to the court with	h your other sche	edules.		
	Yes.							
uns tha	secured claim	nonpriority unsecured cl , list the creditor separately r holds a particular claim, li	for each claim.	For each claim liste	d, identify what t	ype of claim it is. Do	not list claims already inc	luded in Part 1. If more
								Total claim
4.1	Alliance	Laboratory Physici	ans	Last 4 digits of ac	count number	0892		\$65.79
	8085 Riv	Creditor's Name rers Avenue, Suite #	100	When was the deb	ot incurred?	2016		_
	Number Str	con, SC 29406-5968 reet City State Zlp Code		As of the date you	ı file, the claim i	s: Check all that app	bly	
	_	red the debt? Check one.		_				
	■ Debtor	•		Contingent				
	☐ Debtor 2	•		Unliquidated				
	_	1 and Debtor 2 only		☐ Disputed  Type of NONPRIO	RITY unsecure	d claim:		
	_	one of the debtors and and	otilei	Student loans	mi i unscoulet	a Giallii.		
	☐ Check i	f this claim is for a com	nunity	_	ing out of a sena	ration agreement or	divorce that you did not	
	Is the clain	n subject to offset?		report as priority cla	•		jou dia not	
	■ No			•	•	g plans, and other si	milar debts	
	☐ Yes			Other. Specify	Medical			_
								-

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Debtor 1 Nicole A. Cross Case number (if know) 4.2 \$0.00 **Alliance Laboratory Physicians** Last 4 digits of account number Nonpriority Creditor's Name PO Box 5968 When was the debt incurred? Carol Stream, IL 60197-5968 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify notice ☐ Yes 4.3 Last 4 digits of account number 6603 \$2,314.00 Amex Nonpriority Creditor's Name Correspondence Opened 12/01 Last Active Po Box 981540 When was the debt incurred? 11/14 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.4 Atg Credit Llc Last 4 digits of account number 8344 \$560.00 Nonpriority Creditor's Name Opened 02/15 Last Active 1700 W Cortland St Ste 2 When was the debt incurred? 05/13 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Winfield Radiol ☐ Yes

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Case number (if know)

4.5 **Bank Of America** \$16,112.00 Last 4 digits of account number 5887 Nonpriority Creditor's Name Nc4-105-03-14 Opened 04/10 Last Active Po Box 26012 When was the debt incurred? 01/15 Greensboro, NC 27410 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes **Cadence Health** 4.6 Last 4 digits of account number 4796 \$13,634.77 Nonpriority Creditor's Name 25 North Winfield Rd When was the debt incurred? 2015 Winfield, IL 60190 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical bill ☐ Yes \$6,125.00 4.7 **Capital One** Last 4 digits of account number 6903 Nonpriority Creditor's Name Opened 12/98 Last Active 15000 Capital One Dr When was the debt incurred? 05/15 Richmond, VA 23238 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card

Official Form 106 E/F

Debtor 1 Nicole A. Cross

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Case number (if know)

Debtor 1 Nicole A. Cross 4.8 \$1,124.20 **Central Dupage Emergency Phys** Last 4 digits of account number 0892 Nonpriority Creditor's Name PO Box 5940 Dept 20-1098 When was the debt incurred? 2015 Carol Stream, IL 60197-5940 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical bill ☐ Yes 4.9 **Central Dupage Hospital** Last 4 digits of account number 4796 \$0.00 Nonpriority Creditor's Name PO Box 4090 When was the debt incurred? 2015 Carol Stream, IL 60197-4090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Notice 4.1 **Chase Card** 4906 \$489.00 Last 4 digits of account number Nonpriority Creditor's Name **Attn: Correspondence** Opened 07/14 Last Active Po Box 15298 When was the debt incurred? 11/10/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card

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Debtor 1 Nicole A. Cross Case number (if know) 4.1 \$505.11 **Credit One Bank** 5171 Last 4 digits of account number Nonpriority Creditor's Name P,O. Box 60500 When was the debt incurred? 2016 City of Industry, CA 91716-0500 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify credit card ☐ Yes 4.1 **Credit One Bank** 5171 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 98873 When was the debt incurred? 2016 Las Vegas, NV 89193-8873 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify notice 4.1 **Discover Financial** 1072 \$11.782.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 03/05 Last Active Po Box 3025 When was the debt incurred? 11/23/14 New Albany, OH 43054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Credit Card

Page 22 of 54 Case number (if know) Debtor 1 Nicole A. Cross 4.1 \$388.00 **Keynote Consulting** 2539 Last 4 digits of account number Nonpriority Creditor's Name 220 West Campus Drive Opened 04/16 Last Active Suite 102 When was the debt incurred? 06/15 Arlington Heights, IL 60004 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collection Attorney Illinois Gastro 4.1 LVNV Funding 5171 \$785.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 08/15 Last Active Po Box 10497 When was the debt incurred? 01/15 Greenville, SC 29603 As of the date you file, the claim is: Check all that apply Number Street City State ZIp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Credit One** ☐ Yes Other. Specify Bank N.A. 4.1 Med Business Bureau 0968 \$662.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr Opened 01/15 Last Active Suite 400 When was the debt incurred? 07/14 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Collection Attorney Central Dupage

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As of the date you file, the claim is: Check all that apply
As of the date you file, the claim is: Check all that apply
☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
Obligations arising out of a separation agreement or divorce that you did not
report as priority claims
$\square$ Debts to pension or profit-sharing plans, and other similar debts
Other. Specify Credit Card

Page 24 of 54 Case number (if know) Document Debtor 1 Nicole A. Cross

4.2 0	US Bank/Rms CC	Last 4 digits of account number	9201	\$17,540.00
	Nonpriority Creditor's Name Card Member Services Po Box 108	When was the debt incurred?	Opened 07/06 Last Active 01/15	
	St Louis, MO 63166  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.2 1	Weltman, Weinberg & Reis  Nonpriority Creditor's Name	Last 4 digits of account number	1441	\$0.00
	180 N. LaSalle Street Suite 2400 Chicago, IL 60601	When was the debt incurred?	2015	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
		Notice Only	y	
	Yes	Other. Specify Attorney for	or Discover Bank	
4.2	Winfield Laboratory Consultants, SC	Last 4 digits of account number	6598	\$140.80
	Nonpriority Creditor's Name DEPT 4408 Carol Stream, IL 60122-4408	When was the debt incurred?	2015	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d alaim.	
	☐ At least one of the debtors and another	Student loans	u ciaiiii.	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Medical		
		- Other. Opeony		

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Winfield Radiology Consultants, SC	Last 4 digits of account number	4470	\$560.0
Nonpriority Creditor's Name 6910 S. Madison St Willowbrook, IL 60527-5504	When was the debt incurred?	2016	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify medical bil		

### Part 3: List Others to Be Notified About a Debt That You Already Listed

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	_	_	0.00
		you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	76,474.67
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	76,474.67

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		12(1)	311 11(N. / (/ (/) 1/ <del>-</del>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Nicole A. Cross			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	0		Ot 1	710.0	_
2.3	City		State	ZIP Code	
2.3	N				<u> </u>
	Name				
	Number	Street			
				710.0	_
	City		State	ZIP Code	
2.4					_
	Name				
	Number	Street			
	0.1		Ot 1	710.0	_
2.5	City		State	ZIP Code	
2.5	- N				_
	Name				
	- N	0, ,			_
	Number	Street			
	City		State	ZIP Code	<u> </u>

		Docume	ent Page 27 d	of 54	
Fill in thi	is information to identify your	case:			
Debtor 1	Nicole A. Cross				
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, f	filing) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	, ,				
Case nur	mber				<b>—</b> 01 1 1 1 1 1 1 1
(II KIIOWII)					Check if this is an amended filing
					amended ming
Officia	al Form 106H				
	dule H: Your Cod	lobtoro			40/45
Sche	dule n. Your Cod	eptors			12/15
1. Do		you are filing a joint case, of the property o	do not list either spouse operty state or territor erto Rico, Texas, Wash	r <b>y?</b> (Community property st	ates and territories include
in lin Forn	ne 2 again as a codebtor only	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed the coogs. Use Schedule D, Schedu	rith you. List the person shown creditor on Schedule D (Official hedule E/F, or Schedule G to fill or to whom you owe the debt
	riamo, riumbor, oneet, ony, orace and z	0000		Check all schedules the	пат арріу.
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
<u> </u>	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	North and Co.				
	Number Street City	State	ZIP Code		
	•				

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Eill	in this information to identify your ca	200:								
	otor 1 Nicole A. Cr									
	otor 2  ouse, if filing)				_					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_					
(If kr	se number					☐ An		d filing ent showing p as of the follo		
	fficial Form 106l					MN	// DD/ Y	YYY		
	chedule I: Your Income some second to the complete and accurate as possible to the complete and accurate accurate and accurate and accurate accurate and accurate accurate accurate and accurate accurate accurate accurate accurate and accurate a									12/1
spo atta Par	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	r spouse is not filing wi	th you, do not includ	e infor	matio	on about y	our spo	use. If more	space is ı	needed,
1.	Fill in your employment information.		Debtor 1			ı	Debtor 2	or non-filin	g spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed				☐ Emplo	•		
	information about additional	p.c.ycc.	☐ Not employed			l	☐ Not er	mployed		
	employers.	Occupation	Registration							
	Include part-time, seasonal, or self-employed work.	Employer's name	Alexian Brothers	Healt	h					
	Occupation may include student or homemaker, if it applies.	Employer's address	800 Biesterfield Elk Grove Village		0007	, 				
		How long employed the	here? 2 years				_			
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to re	port for	any I	line, write S	\$0 in the	space. Inclu	de your nor	n-filing
-	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	emplo	oyers for th	nat perso	n on the lines	s below. If y	you need
						For Debt	or 1	For Debto		
2.	List monthly gross wages, sala deductions). If not paid monthly, or			2.	\$	2,9	18.00	\$	N/A	
3.	Estimate and list monthly overti	ime pay.		3.	+\$		0.00	+\$	N/A	

2,918.00

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Nicole A. Cross	-	Case	number (if known)			
				For	Debtor 1		ebtor 2 or iling spouse	
	Cop	y line 4 here	4.	\$	2,918.00	\$	N/A	
5.	l ist	all payroll deductions:						
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	496.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$ 	0.00	· \$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	·	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	·	N/A	
	5e.	Insurance	5e.	\$_	202.00	·	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	698.00	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,220.00	\$	N/A	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	. \$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	. \$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	. \$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f. 8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: Civil Fraud Repayment Plan	8f. 8g. 8h.+	\$ \$	0.00 0.00 1,200.00	\$ \$ + \$	N/A N/A N/A	
0	A .1.		[				21/2	7
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,200.00	\$	N/A	<u>\</u>
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$	;	3,420.00 + \$		N/A = \$	3,420.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						·
11.	Inclu othe Do i	te all other regular contributions to the expenses that you list in <i>Schedule</i> ade contributions from an unmarried partner, members of your household, your prince friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not acify:	depen		•	•	hedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					12. \$	3,420.00
							Combin	
13.	Do y	you expect an increase or decrease within the year after you file this form No.  Yes. Explain:	?				monthly	/ income

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Fill in	this informa	ation to identify yo	our case:			I		
Debtor		Nicole A. Cro				Chec	k if this is:	
		HICOIC A. OI	<i>J</i> 33				An amended filing	
Debtor (Spous	r 2 se, if filing)							ving postpetition chapter the following date:
United	l States Bank	ruptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS	-	MM / DD / YYYY	
Case n	number own)							
Offi	icial Fo	orm 106J						
Sch	hedule	J: Your	Exper	nses				12/15
Be as inform	s complete mation. If n	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this	e filing together, b form. On the top of	oth are equa f any additio	ally responsible fonds anal pages, write y	or supplying correct your name and case
Part 1		ribe Your House	hold					
_	Is this a joi ■ No. Go to							
		es Debtor 2 live i	in a separ	ate household?				
	□ Y		st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	e <i>hold</i> of Debt	or 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
С	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								Yes
								□ No □ Yes
3. <b>[</b>	Do your ex	penses include	_	No				⊔ Yes
e	expenses d	of people other to d your depende	han $_{oldsymbol{\sqcap}}$	Yes				
Part 2	2: Estim	nate Your Ongoi	ng Monthi	ly Expenses				
Estim exper	nate your e	xpenses as of you	our bankr	uptcy filing date unless y y is filed. If this is a supp				
the va		h assistance an		government assistance in cluded it on <i>Schedule I:</i> Y			Your exp	enses
(Onio		JOI.)				_		
		or home owners nd any rent for the		ses for your residence. In or lot.	nclude first mortgag	e 4. \$		1,200.00
li	If not includ	ded in line 4:						
4	4a. Real	estate taxes				4a. \$		0.00
	•	erty, homeowner's				4b. \$		0.00
				upkeep expenses		4c. \$		0.00
		eowner's associat		aominium aues <b>our residence.</b> such as hoi	me equity loans	4d. \$ 5. \$		184.00 0.00

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Nicole A	A. Cross	Case num	ber (if known)	
lities:				
	/ heat_natural das	6a.	\$	180.00
	•		· -	60.00
			·	280.00
•				0.00
			·	380.00
			·	
			·	0.00 125.00
•			· -	
	•		· -	65.00
	•	11.	<b>a</b>	75.00
		12.	\$	300.00
			·	100.00
			·	0.00
	urbutions and religious donations	14.	Ψ	0.00
	nsurance deducted from your nay or included in lines 4 or	. 20		
			\$	18.00
			·	0.00
				101.00
				0.00
			Ψ	0.00
	include taxes deducted from your pay or included in lines		\$	0.00
	lease navments:		<u> </u>	0.00
		17a.	\$	0.00
			· -	0.00
			·	0.00
•	·			0.00
	· · · · · · · · · · · · · · · · · · ·		Ψ	0.00
			\$	0.00
			\$	0.00
	,		· -	
	perty expenses not included in lines 4 or 5 of this form		our Income.	
				0.00
		20b.	\$	0.00
. Property.	homeowner's, or renter's insurance	20c.	\$	0.00
				0.00
				0.00
			*	0.00
ier. Specify.			<del>-</del> φ	0.00
culate your	monthly expenses			
a. Add lines 4	through 21.		\$	3,068.00
o. Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Fo	orm 106J-2	\$	<u> </u>
. Add line 22	2a and 22b. The result is your monthly expenses.		\$	3,068.00
			· —	<u> </u>
-				
	• ,		·	3,420.00
c. Copy you	r monthly expenses from line 22c above.	23b.	-\$	3,068.00
Subtract	your monthly expenses from your monthly income.	20-	œ.	352.00
	It is your monthly net income.	23c.	\$	332.00
	icio your monany not moomo.			
The resul	,	voor ofter von file 41-1-	form?	
The resul	an increase or decrease in your expenses within the			se or decrease because o
you expect example, do y	an increase or decrease in your expenses within the you expect to finish paying for your car loan within the year or do y			se or decrease because o
you expect example, do y	an increase or decrease in your expenses within the			ise or decrease because o
	lities: Electricity Water, se Telephon Other. Sp od and hous ildcare and othing, launce sonal care dical and de insportation not include of tertainment, aritable con urance. not include if a. Life insur b. Health in: b. Vehicle ir d. Other ins tecify: tallment or a. Car paym b. Car paym c. Other. Sp dr. Other	lities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: dand housekeeping supplies ildcare and children's education costs whing, laundry, and dry cleaning resonal care products and services dical and dental expenses insportation. Include gas, maintenance, bus or train fare. not include car payments. tertainment, clubs, recreation, newspapers, magazines, and book aritable contributions and religious donations urrance. not include insurance deducted from your pay or included in lines 4 or i. Life insurance b. Health insurance c. Vehicle insurance d. Other insurance. Specify: tess. Do not include taxes deducted from your pay or included in lines actify: tallment or lease payments: a. Car payments for Vehicle 1 b. Car payments for Vehicle 2 c. Other. Specify: tur payments of allimony, maintenance, and support that you did not did to the payments of allimony, maintenance, and support that you did not the payments you make to support others who do not live with your payments of allimony, maintenance, and support that you did not great payments you make to support others who do not live with your payments you make to support others who do not live with your payments you make to support others who do not live with your payments you make to support others who do not live with your payments you make to support others who do not live with your payments you make to support others who do not live with your payments you make to support others who do not live with your payments you make to support others who do not live with your payments you make to support others who do not live with your payments you make to support others who do not live with your payments your payments, or renter's insurance defined from your pay on line 5, Schedule I, Your Income (Official Income). Property, homeowner's, or renter's insurance defined from your payments. Copy line 12 (your combined monthly income) from Schedule I. Copy line 12 (your combined mo	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Od and housekeeping supplies Od od that leavenses Od and housekeeping supplies Od od that leavenses Od od that leavenses Od to include dayenses Od	Ilities:   Electricity, heat, natural gas   Ga. \$

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=:::					
	formation to identify your	case:			
Debtor 1	Nicole A. Cross First Name	Middle Name	Last Name		
Debtor 2	riist ivaille	wilddie Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official Fo	orm 106Dec				
Declara	ation About a	an Individual	<b>Debtor's Sc</b>	hedules	12/15
years, or both	ney of property by fraud in n. 18 U.S.C. §§ 152, 1341, 1 Sign Below		nuptcy case can result in	Times up to \$250,00	0, or imprisonment for up to 20
Did you	pay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes	s. Name of person				kruptcy Petition Preparer's Notice,
				,	, and Signature (Official Form 119)
•	enalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules filed	a with this declaration	on and
X /s/ N	licole A. Cross		x		
	ole A. Cross ature of Debtor 1		Signature of I	Debtor 2	

Date \_\_\_\_\_

Date November 29, 2016

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Fill in	this inform	ation to identify you	r case:						
Debtor		Nicole A. Cross							
		First Name	Middle Name	Last Name					
Debtor (Spouse		First Name	Middle Name	Last Name					
	•	kruptov Court for the	NORTHERN DISTRICT (	OE ILLINOIS					
United	States barr	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
Case r	number					Check if this is an mended filing			
	cial For		Affairs for Individ	duals Filing for B	ankruptcy	4/10			
Be as o	complete ar ation. If mo r (if known)	nd accurate as possi ore space is needed, ). Answer every que	ble. If two married people a attach a separate sheet to	are filing together, both are this form. On the top of an	equally responsible for sup y additional pages, write you	plying correct			
		current marital statu		TEIVER BEIOTE					
	Married								
	Not marr	ied							
2. Du	During the last 3 years, have you lived anywhere other than where you live now?								
	<ul><li>No</li><li>Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li></ul>								
D	ebtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
					ity property state or territory ico, Texas, Washington and W				
	No								
	Yes. Mak	ke sure you fill out Scl	nedule H: Your Codebtors (O	fficial Form 106H).					
Part 2	Explain	the Sources of You	r Income						
Fil	I in the total	amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?			
	No								
•		in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		of current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$30,408.20	☐ Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

Official Form 107

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Case number (if known) Document

Debtor 1 Nicole A. Cross

					Debtor 1					Debt	or 2			
						of income that apply.	(be	oss income fore deducti clusions)			ces of inc k all that a		(	Gross income before deductions and exclusions)
			dar year: December	31, 2015 )	■ Wages bonuses,	s, commissions, tips		\$29	,268.00		ages, con ses, tips	nmissions,		
					☐ Operat	ing a business				Пο	perating a	business		
			lar year be December		☐ Wages bonuses,	s, commissions, tips			\$0.00		ages, con ses, tips	nmissions,		
					☐ Operat	ing a business				Пο	perating a	business		
	Include and de winni	de indother pings. I each s	ome regard oublic benef f you are fili	lless of wheth it payments; ng a joint cas he gross inco	er that inco pensions; re e and you h		amples rest; di you rec	s of <i>other ind</i> ividends; mo ceived toget	come are al oney collect her, list it o	ted fron	n lawsuits; e under D	; royalties; ebtor 1.		rity, unemployment ambling and lottery
					Debtor 1					Debt	or 2			
					Sources of Describe b		eac (be	oss income ch source fore deducti clusions)			rces of inc ribe below		(	Gross income before deductions and exclusions)
Par	rt 3:	List	Certain Pa	yments You	Made Befo	re You Filed for	Bankr	uptcy						
6.		No.	Neither Deindividual puring the No. Yes	ebtor 1 nor Derimarily for a 90 days befor Go to line 7 List below e paid that crunot include to adjustment or Debtor 2 or 90 days befor Go to line 7 List below e	personal, for you filed to editor. Do n payments to on 4/01/19  r both have re you filed to editor. Do n payments to on 4/01/19  r both have re you filed to each credito ments for do	amily, or househo for bankruptcy, di r to whom you pai ot include paymer o an attorney for the and every 3 year or bankruptcy, di r to whom you pai omestic support o	imer d id you p id a tot its for a his bar s after imer d id you p	pay any cre tal of \$6,425 domestic sunkruptcy cas that for cas lebts. pay any cre	ditor a total  * or more in pport obligate. es filed on of ditor a total  r more and	of \$6,4 n one cations, or after	r more pa such as cl the date of 0 or more	ore?  yments and hild support of adjustment?  you paid to the support of the supp	d the total	alimony. Alsó, do
	Cro	ditor's	s Name and	·	and barmia	Dates of payme	nt	Total	mount	Δma	unt you	Was thi	e nav	ment for
	CIE	uitoi s	i vanie alic	. Auu 633		Dates of paying		i Utal a	paid		still owe	was till	a pay	ment for

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Debtor 1	Nicole A. Cross	Document	Page 35 of 54 Case number (if known)	
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7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.  No  Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo		Reason for	this payment	
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi  No Yes. List all payments to an insider		•			ount of a de	ebt that benefited	d an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount ye		Reason for	this payment itor's name	
Pai	t 4: Identify Legal Actions, Repossession	s, and Foreclosures	·					
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.							
	Case title Case number	Nature of the case	of the case Court or agency		;	Status of the case		
	Discover Bank v debtor 2015-AR-1441	Breach of Contract	DuPage County Courthouse 505 North County Farm Rd Wheaton, IL 60187			■ Pending □ On appeal □ Concluded		
	Capital One Bank v. debtor 2016 SR 001036	Breach of Contract	DuPage Count 505 North Cou Wheaton, IL 60	nty Farm Ro	t l	■ Pending □ On appe □ Conclude		
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  No. Go to line 11.		rty repossessed, f	oreclosed, ga	arnishe	ed, attached	l, seized, or levie	∍d?
	Yes. Fill in the information below.	Described to Describe			Dete		Walan at	f 41
	Creditor Name and Address	Describe the Property  Explain what happened					Value of prop	
11.								ur
	Creditor Name and Address	Describe the action the creditor took  Date take				te action was Amount		
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No  Yes		rty in the possess			or the bene	efit of creditors, a	а

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Case number (if known) Document Debtor 1 Nicole A. Cross

Pai	List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrupto  No  Yes. Fill in the details for each gift.	y, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	y, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or contri  Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pai	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling?  ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	how the loss occurred Incl	scribe any insurance coverage for the loss ude the amount that insurance has paid. List pending trance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prep Include any attorneys, bankruptcy petition prepa	, did you or anyone else acting on your behalf pay or aring a bankruptcy petition?  rers, or credit counseling agencies for services require		rty to anyone you
	□ No ■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Law Offices of Joseph P. Doyle 105 S. Roselle Rd. Suite 203 Schaumburg, IL 60193	\$0.00 out of \$4,000.00	2016	\$0.00
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Nicole A. Cross

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes Fill in the details					
	— 100.1 m m the detaile.					
	Person Who Received Transfer Address	Received Transfer Description and value of property transferred		Describe any property or payments received or debts paid in exchange		Date transfer was made
	Person's relationship to you	o you				
	Robert W. Corbett 27 W. State Street Geneva, IL 60134 none	In 2010 Debtor, Melanie Cross & Dennis Cross names' were quit claimed off of property located at 207 Spring Court, Bloomingdale, IL 60108 in favor of Robert W. Corbett. Debtor's parents wired \$104,421.63 to Robert W. Corbett and he was suppose to use those funds to pay off the mortgage on debtor's home. Corbett usurped the funds. Corbett was sued by the Cross Family and he signed a promissory note to pay back the funds and currently pays the mortgage on the home directly to the mortgage.			2011	
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No					
	Yes. Fill in the details.					
	Name of trust	Description and va	lue of the prop	perty trans	ferred	Date Transfer was made
Pai	tt 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit I	Boxes, and Sto	orage Unit	s	
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No					
	Yes. Fill in the details.					
		st 4 digits of count number	Type of accou instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?  No Yes. Fill in the details.	before you filed for b	oankruptcy, an	y safe dep	posit box or other deposi	cory for securities,
	Name of Financial Institution	Who else had acce	ess to it?	Describe	the contents	Do you still
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Str State and ZIP Code)	eet, City,			have it?

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22.	Have you stored property in a storage unit or p	place other than your home within 1	vear before you filed for bankruptcy?	?		
	_	,	,,			
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?		
Part	9: Identify Property You Hold or Control for	Someone Else				
	Oo you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.					
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Valu		
Part	10: Give Details About Environmental Inform	aation				
For t	he purpose of Part 10, the following definitions	apply:				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, ground	<del>-</del> •			
	Site means any location, facility, or property as	•	aw, whether you now own, operate, o	or utilize it or use		
	to own, operate, or utilize it, including disposal Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or	nmental law defines as a hazardous	waste, hazardous substance, toxic s	substance,		
Repo	ort all notices, releases, and proceedings that y	ou know about, regardless of wher	they occurred.			
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	under or in violation of an environme	ental law?		
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any	release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admini	strative proceeding under any envi	ronmental law? Include settlements a	and orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Part	11: Give Details About Your Business or Cor	nnections to Any Business				
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity.	either full-time or part-time			

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Deb	otor 1	Nicole A. Cross	Cas	e number (if known)
		☐ A partner in a partnership		
		_ `		
		☐ An officer, director, or managing exc	·	
		An owner of at least 5% of the voting	g or equity securities of a corporation	
		No. None of the above applies. Go to F	art 12.	
		Yes. Check all that apply above and fill	in the details below for each business.	
		iness Name	Describe the nature of the business	Employer Identification number
		ress ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.
			·	Dates business existed
28.			cy, did you give a financial statement to an	yone about your business? Include all financial
	instit	tutions, creditors, or other parties.		
		No		
		Yes. Fill in the details below.		
	Nam	ne Iress	Date Issued	
		ber, Street, City, State and ZIP Code)		
Par	t 12:	Sign Below		
Lha		ed the encurers on this Ctatament of Fin	anaial Affaira and any attachments and I d	
are t	true a	nd correct. I understand that making a	false statement, concealing property, or ob	eclare under penalty of perjury that the answers staining money or property by fraud in connection
		nkruptcy case can result in fines up to \$ §§ 152, 1341, 1519, and 3571.	\$250,000, or imprisonment for up to 20 year	rs, or both.
		le A. Cross A. Cross	Signature of Debtor 2	
		e of Debtor 1	orginatare or bostor 2	
Dat	e N	ovember 29, 2016	Date	
		·	on a C Eliza contact A Contract Contrac	- (au Bandana (au (au (au (au (au (au (au (au (au (a
	-	ttach additional pages to Your Stateme	nt of Financial Affairs for Individuals Filing	Tor Bankruptcy (Official Form 107)?
		ay or agree to hav someone who is not	an attorney to halp you fill out hanks with	forms?
		ay or agree to pay someone who is not	an attorney to help you fill out bankruptcy	IOIIIIS!
	-			

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO: .

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: November 27, 2016

Signed:

Nicole A. Cross

Signed:

Upseph Pl Doyle 6277393

Attorney for the Debtor(s)

Debtor(s)

Do not sign this agreement if the amounts are blank.

**Local Bankruptcy Form 23c** 

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B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court**Northern District of Illinois

Nicole A. Cross		Case No.			
	Debtor(s)	Chapter	13	_	
DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR DE	EBTOR(S)		
ompensation paid to me within one year before the fili	ing of the petition in bankrupto	y, or agreed to be paid	to me, for services rendered or to	.0	
			4,000.00		
Prior to the filing of this statement I have received		\$	0.00		
Balance Due		\$	4,000.00		
he source of the compensation paid to me was:					
■ Debtor □ Other (specify):					
he source of compensation to be paid to me is:					
■ Debtor □ Other (specify):					
I have not agreed to share the above-disclosed com	pensation with any other perso	n unless they are mem	bers and associates of my law fir	rm.	
				L	
In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credit [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application	atement of affairs and plan whitors and confirmation hearing, reduce to market value; eons as needed; preparation	ch may be required; and any adjourned hea xemption planning; on and filing of adve	rings thereof;  preparation and filing of ersary proceedings avoidin		
	CERTIFICATION				
	ny agreement or arrangement f	or payment to me for r	epresentation of the debtor(s) in		
ovember 29, 2016					
	Signature of Attor Law Office of Jo 105 S. Roselle I Schaumburg, IL 847-985-1100	ney oseph P. Doyle LLC Road, Suite 203 <sub>-</sub> 60193 Fax: 847-985-1126	:		
	DISCLOSURE OF COMPE  Tursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the filitie rendered on behalf of the debtor(s) in contemplation  For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due  The source of the compensation paid to me was:  Debtor Other (specify):  The source of compensation to be paid to me is:  Debtor Other (specify):  I have not agreed to share the above-disclosed compencopy of the agreement, together with a list of the nation return for the above-disclosed fee, I have agreed to an entering of the debtor's financial situation, and render the preparation and filing of any petition, schedules, stated and the Representation of the debtor at the meeting of creditation.  Representation agreements and application second mortgages on personal resider any other adversary proceeding.  By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any of	Disclosure of Compensation of the debtor of the source of the compensation paid to me within one year before the filing of the petition in bankrupte e rendered on behalf of the debtor(s) in contemplation of or in connection with the base of the filing of the statement I have received.  Balance Due  The source of the compensation paid to me was:  Debtor Other (specify):  The source of compensation to be paid to me is:  Debtor Other (specify):  The source of compensation to be paid to me is:  Debtor Other (specify):  I have agreed to share the above-disclosed compensation with any other person copy of the agreement, together with a list of the names of the people sharing in the names of the debtor's financial situation, and rendering advice to the debtor in de Preparation and filing of any petition, schedules, statement of affairs and plan whis. Representation of the debtor at the meeting of creditors and confirmation hearing, (Other provisions as needed)  Negotiations with secured creditors to reduce to market value; e reaffirmation agreements and applications as needed; preparatic second mortgages on personal residence or mechanic's liens, ju any other adversary proceeding.  The source of the debtor(s), the above-disclosed fee does not include the following Representation of the debtors in any other dischargeability actions.  CERTIFICATION  CERTIFICATION  Certify that the foregoing is a complete statement of any agreement or arrangement funkruptcy proceeding.  Source of the schaumburg, II.  Aly Joseph P. Doylo Signature of Attorn Law Office of J.  105 S. Roselle for Schaumburg, II.  8447-985-1100. Figure fightbills.c.	Disclosure Of Compensation Of Attorney For Discussant to 11 U. S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above nan ompensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid e rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as fol For legal services, I have agreed to accept	Debtor(s) Chapter 13  DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)  tursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b). I certify that I am the attorney for the above named debtor(s) and that ompensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or the rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:  For legal services, I have agreed to accept  Prior to the filing of this statement I have received  \$	

#### United States Bankruptcy Court Northern District of Illinois

In re	Nicole A. Cross		Case No.		
		Debtor(s)	Chapter	13	
	VERIFICATION OF CREDITOR MATRIX				
		Number of C	reditors:	23	
	The above-named Debtor(s) l (our) knowledge.	hereby verifies that the list of creditor	rs is true and	correct to the best of my	
Date:	November 29, 2016	/s/ Nicole A. Cross Nicole A. Cross Signature of Debtor			

Alliance Laboratory Physicians 8085 Rivers Avenue, Suite # 100 Charleston, SC 29406-5968

Alliance Laboratory Physicians PO Box 5968 Carol Stream, IL 60197-5968

Amex Correspondence Po Box 981540 El Paso, TX 79998

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Cadence Health 25 North Winfield Rd Winfield, IL 60190

Capital One 15000 Capital One Dr Richmond, VA 23238

Central Dupage Emergency Phys PO Box 5940 Dept 20-1098 Carol Stream, IL 60197-5940

Central Dupage Hospital PO Box 4090 Carol Stream, IL 60197-4090

Chase Card Attn: Correspondence Po Box 15298 Wilmington, DE 19850 Credit One Bank P,O. Box 60500 City of Industry, CA 91716-0500

Credit One Bank
P.O. Box 98873
Las Vegas, NV 89193-8873

Discover Financial Po Box 3025 New Albany, OH 43054

Keynote Consulting 220 West Campus Drive Suite 102 Arlington Heights, IL 60004

LVNV Funding Po Box 10497 Greenville, SC 29603

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Medical Business Burear, LLC P. O. Box 1219 Park Ridge, IL 60068-7219

Target C/O Financial & Retail Srvs Mailstopn BT POB 9475 Minneapolis, MN 55440

US Bank/Rms CC Card Member Services Po Box 108 St Louis, MO 63166

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Weltman, Weinberg & Reis 180 N. LaSalle Street Suite 2400 Chicago, IL 60601

Winfield Laboratory Consultants, SC DEPT 4408 Carol Stream, IL 60122-4408

Winfield Radiology Consultants, SC 6910 S. Madison St Willowbrook, IL 60527-5504